



CLIENT BACKGROUND QUESTIONNAIRE

Date of Interview:

Name:

Birthdate:

Identification Number:

Address:

Telephone:

Education (Degree) (School Name):

Vocational Training (Skills) (School Name):

If applicable:

Driver's License Number:

Automobile Model:

Automobile License Plate Number:

Who would you like to contact about your arrest? Please provide their name, address and telephone number.

Is Mandarin the dialect you use on a daily basis? If not, what is? Can you read and write? Do you need an interpreter?

Have you contacted another lawyer about this case? Please provide details.

Have you received the arrest warrant? Please provide details.

List all prior arrests and the corresponding sentences.

Offense	Date	Result

Family

Name	Address	Telephone	Birthdate	Place of Employment
Father				
Mother				
Brothers/Sisters				
Spouse				
Children				

Who should be contacted in case of emergency? If it is not a family member, please provide their name, address and telephone number. How long have you known them?

Employment History (List in sequential order, beginning with the most recent position)

From/To	Name of Employer	Address	Telephone	Job Type	Position and Salary

List personal reference with complete addresses (people who know you, other than your relatives, such as friends or co-workers).

Name	Address	Telephone

Description of the Charged Offense

Circumstances of the arrest, searches, and statements made to the police

Did anything unusual happen when you were arrested? Were you, anyone with you, or any place searched? Did the police seize any items? Did the police make a detailed list of the seized items? Did you make a statement to the police? Did any of the co-defendants make statements to the police?

Did you know the alleged victim? If so, describe the nature of your relationship. Did you know the alleged co-defendants? If so, describe the nature of your relationship.

Physical, Mental, Emotional, and Marital Problems and Drug and Alcohol Abuse

Do you have a problem listed above that may be related to your case?

Y__ N__

If yes, please explain:

How long have you had this problem? Who first diagnosed it and when?

Are you currently undergoing treatment or seeing a counselor? Y__N__

Name:

Telephone:

Are you currently taking medication for this problem? If so, what kind of medication, how much are you taking, and what is the daily dosage? When was this medication first prescribed? Who prescribed it?

Witnesses: Please list all the names, addresses, and telephone numbers of people who can provide evidence or information about the case.

Name	Address	Telephone

Co-Defendants: Please list all the names, addresses, and telephone numbers of people who were involved in the alleged crime. What was the extent of their involvement? Have they have made statements to the police? What did they say? Are they currently

in custody? Do they have previous criminal records? What is the relationship between the co-defendants and the client?

Name	Address	Telephone

Bail

What finances do you have for bail?

Are there family members or co-workers who can guarantee that you will not escape prosecution.

Client's physical features

Height	Weight	Appearance	Other information pertaining to eyewitness identification